		Age Groups							
StateF	Υ	Total	<1	1-2*	3-5	6-9	10-14	15-18	19-20
	CN	2,901,474	424,282	477,914	592,852	624,154	704,613	430,919	147,132
1. Total Individuals	MN	2,258,850	262,602	406,945	456,000	497,476	511,696	350,351	184,341
Eligible for EPSDT	UNIQUE TOTAL (1)	4,302,093	606,534	747,367	881,420	964,016	1,056,766	673,232	298,597
	TOTAL	5,160,324	686,884	884,859	1,048,852	1,121,630	1,216,309	781,270	331,473
2a. State Periodicity									
Schedule			7	4	3	2	5	4	2
2b. Number of Years									
in Age Group			1	2	3	4	5	4	2
2c. Annualized State									
Periodicity Schedule			7.00	2.00	1.00	0.50	1.00	1.00	1.00
	CN	22,378,228	1,968,634	2,747,186	3,766,398	4,480,112	5,419,835	3,102,114	893,949
3a. Total Months	MN	17,483,286	1,314,563	2,447,372	2,953,306	3,483,930	3,728,708	2,414,282	1,141,125
of Eligibility	TOTAL	39,861,514	3,283,197	5,194,558	6,719,704	7,964,042	9,148,543	5,516,396	2,035,074
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	CN	0.64	0.39	0.48	0.53	0.60	0.64	0.60	0.51
3b. Average Period	MN	0.64	0.42	0.50	0.54	0.58	0.61	0.57	0.52
of Eligibility	TOTAL	0.77	0.45	0.58	0.64	0.69	0.72	0.68	0.57
4. Expected Number of	CN		2.71	0.96	0.53	0.30	0.64	0.60	0.51
Screenings per	MN		2.92	1.00	0.54	0.29	0.61	0.57	0.52
Eligible	TOTAL		3.16	1.16	0.64	0.34	0.72	0.68	0.57
	CN	2,891,430	1,148,370	457,864	313,867	186,671	451,653	258,510	74,496
5. Expected Number	MN	2,173,006	766,828	407,895	246,109	145,164	310,726	201,190	95,094
of Screenings	TOTAL	5,064,436	1,915,198	865,760	559,975	331,835	762,379	459,700	169,590
	CN	1,487,425	547,026	314,873	242,929	140,188	161,093	74,818	6,498
6. Total Screens	MN	940,017	326,900	267,633	158,737	75,640	72,986	31,211	6,911
Received	TOTAL	2,425,118	873,458	581,894	401,126	215,582	233,761	105,904	13,394
	1.0	2, .20, 1 10	575,100	331,334	101,120	210,002	200,701	100,004	10,004
	CN	0.51	0.48	0.69	0.77	0.75	0.36	0.29	0.09
	MN	0.43	0.43	0.66	0.64	0.52	0.23	0.16	0.07
7. Screening Ratio	TOTAL	0.48	0.46	0.67	0.72	0.65	0.31	0.23	0.08

*Includes 12-month visit

Note: "CN" - Categorically Needy; "MN" - Medically Needy Form CMS-416 (06/99)

		Age Groups							
State	FY	Total	<1	1-2*	3-5	6-9	10-14	15-18	19-20
8. Total Eligibles Who									
Should Receive at	CN	2,167,342	424,282	457,864	313,867	186,671	451,653	258,510	74,496
Least One Initial or	MN	1,667,829	262,602	406,945	246,109	145,164	310,726	201,190	95,094
Periodic Screen	TOTAL	3,637,379	606,534	747,367	559,975	331,835	762,379	459,700	169,590
9. Total Eligibles									
Receiving at Least	CN	960,081	249,513	195,482	194,068	119,065	134,770	62,779	4,404
One Initial or	MN	537,096	127,068	142,039	120,315	60,125	57,863	24,370	5,316
Periodic Screen	TOTAL	1,497,177	376,581	337,521	314,383	179,190	192,633	87,149	9,720
	CN	0.44	0.59	0.43	0.62	0.64	0.30	0.24	0.06
	MN	0.32	0.48	0.35	0.49	0.41	0.19	0.12	0.06
10. Participant Ratio	TOTAL	0.41	0.62	0.45	0.56	0.54	0.25	0.19	0.06
11. Total Eligibles	CN	331,460	160,493	71,309	41,469	21,075	25,164	10,796	1,154
Referred for	MN	226,979	95,387	62,888	32,879	14,249	14,277	5,949	1,350
Corrective Treatment	TOTAL	558,439	255,880	134,197	74,348	35,324	39,441	16,745	2,504
12a. Total Eligibles	CN	685,927	682	31,170	143,785	192,763	209,364	109,888	24,695
Receiving Any	MN	554,007	557	30,521	122,018	162,272	148,444	80,161	33,828
Dental Services	TOTAL	1,189,760	1,235	60,111	255,044	342,288	346,337	182,809	57,028
12b. Total Eligibles	CN	126,407	21	1,792	11,374	18,751	35,029	45,768	15,073
Receiving Preventive	MN	107,815	15	1,854	9,638	15,514	23,776	35,852	22,902
Dental Services	TOTAL	231,611	36	3,624	20,751	33,938	58,346	80,688	37,765
12c. Total Eligibles	CN	400,197	144	10,819	76,194	125,509	116,603	63,723	15,580
Receiving Dental	MN	324,110	100	10,861	66,040	106,619	81,816	45,639	20,594
Treatment Services	TOTAL	707,508	244	21,287	138,822	227,007	195,100	107,116	35,535
13. Total Eligibles	CN	1,739,035	205,581	303,743	371,240	399,159	447,467	259,408	80,055
Enrolled in	MN	1,714,622	184,746	330,318	365,392	380,387	381,874	255,109	128,161
Managed Care	TOTAL	2,886,012	350,189	540,948	619,397	673,720	722,025	441,606	189,432
14. Total Number of	CN	157,714	9,271	83,382	46,401	9,816	6,248	2,506	90
Screening Blood	MN	263,661	16,078	148,827	71,401	14,645	9,012	3,463	235
Lead Tests	TOTAL	421,375	25,349	232,209	117,802	24,461	15,260	5,969	325

^{1.} During this time period there were cases where some beneficiaries had multiple aid codes, one falling in the MN category and another in the CN category. The Unique Total reflects a count for each beneficiary.

Note: "CN" - Categorically Needy; "MN" - Medically Needy Form CMS-416 (06/99)

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Aid Code	Aid Code Description	DHS Primary Category	DHS Secondary	
01	Refugee Cash Assistance (RCA)	Refugees		
03	Adoption Assistance Program-Federal	Medically Indigent	Child	
04	AAP/AAC-NON FEDERAL	Medically Indigent	Child	
08	Entrant Cash Assistance	Refugees		
0A	RCA-Exempt from Grant Cuts	Refugees		
1E	Craig v Bonta - Aged	Public Assistance	Aged	
20	Blind-SSI/SSP-Cash	Public Assistance	Blind	
28	Blind-In Home Support Services	Public Assistance	Blind	
2A	Abandoned Baby Program	Medically Indigent	Child	
2E	Craig v Bonta - Blind	Public Assistance	Blind	
30	TANF-FG	Public Assistance	Families	
32	TANF-CalWORKS-FG-State Only (cash)	Public Assistance	Families	
33	TANF-CalWORKS-UP-State Only (cash)	Public Assistance	Families	
35	TANF-Unemployed Parent	Public Assistance	Families	
36	Disabled-COBRA-Widow/ers	Public Assistance	Disabled	
38	Edwards vs. Kizer	Public Assistance	Families	
3A	TANF-Calif Altern Assist Program-FG	Public Assistance	Families	
3C	TANF-Calif Altern Assist Prog-Unempl Parent	Public Assistance	Families	
3E	CALWORKS LEGAL IMMIGRANTS-FG-MIXED CASES	Public Assistance	Families	
3G	TANF-CALWORKS-FG-EXEMPT-STATE ONLY (32)	Public Assistance	Families	
3H	TANF-CALWORKS-UP-EXEMPT-STATE ONLY (33)	Public Assistance	Families	
3L	CALWORKS LEGAL IMMIGRANT-FG-STATE ONLY	Public Assistance	Families	
ЗМ	CALWORKS LEGAL IMMIGRANT-UP-STATE ONLY	Public Assistance	Families	
3P	TANF-UP-Exempt (35)	Public Assistance	Families	
3R	TANF-FG Exempt (30)	Public Assistance	Families	
3U	CALWORKS LEGAL IMMIGRANT-UP-MIXED CASES	Public Assistance	Families	
3W	TANF - Timed Out (State-Only)	Public Assistance	Families	
40	TANF-Foster Care(FC)/NonFederal	Public Assistance	Families	
42	TANF-Foster Care(FC)/Federal	Public Assistance	Families	
43	EA-Abus/Negl/Expl Child	Public Assistance	Families	
45	Foster Care (FC)	Medically Indigent	Child	
46	TANF-FC Volun Placed	Public Assistance	Families	

Aid Code	Aid Code Description	DHS Primary Category	DHS Secondary
47	200% - Infant Citizen	Other	200% Income
4A	Adoption Assistance Program (AAP)	Medically Indigent	Child
4C	TANF-VFC/Fed Voluntary Foster Care	Public Assistance	Families
4F	KinGAP Cash Assistance	Public Assistance	Families
4G	KinGAP Cash Assistance State Only	Public Assistance	Families
4K	Emergency Assistance Foster Care-Probation	Medically Indigent	Child
4M	Former Foster Care Children	Medically Indigent	Child
51	IRCA/Aliens/Full Scope	IRCA Aliens	
56	IRCA Full Scope FFP	IRCA Aliens	
5K	EA Foster Care-CWS-State Only	Medically Indigent	Child
60	Disabled-SSI/SSP-Cash	Public Assistance	Disabled
66	Disabled-Pickle Eligibility	Public Assistance	Disabled
68	Disabled-IHSS	Public Assistance	Disabled
6A	Disabled Adl Chld Blind	Public Assistance	Blind
6C	Disabled Adult Child (DAC)-Disabled	Public Assistance	Disabled
6E	Craig v Bonta - Continued Eligibility for the Disabled	Public Assistance	Disabled
6N	No Longer Disabled Bene in Appeal (not 6R)	Public Assistance	Disabled
6P	PRWORA No Longer Disabled Children	Public Assistance	Disabled
72	133%-Citizen/Lawful Perm Res/PRUCOL/Cond Stat	Other	133% Poverty
7A	100% Citizen Child	Other	100% Poverty
7T	National School Lunch Program (NSLP) Enrollment	Medically Indigent	Child
80	QMB	QMB-Only	
82	Medically Indigent(MI) Person under 21	Medically Indigent	Child
83	Medically Indigent(MI) Person under 21 SOC	Medically Indigent	Child
86	Medically Indigent(MI) Pregnant No SOC	Medically Indigent	Adult
87	Medically Indigent(MI) Pregnant SOC	Medically Indigent	Adult
8E	Accelerated Enrollment - Children	Medically Indigent	Child
8P	133% Excess Property Child	Other	133% Poverty
8R	100% Excess Property Child	Other	100% Poverty
8U	Deemed Eligibility (DE) CHDP Gateway/Medi-Cal	Other	200% Income
8V	Deemed Eligibility (DE) CHDP Gateway/Medi-Cal	Other	200% Income
8W	CHDP Gateway/Medi-Cal	Medically Indigent	Child

Aid Code	Aid Code Description	DHS Primary Category	DHS Secondary
1X	Aid to the Aged - MSSP (FFP)	Medically Needy	Aged
1Y	Aid to the Aged - MSSP (FFP) SOC	Medically Needy	Aged
23	Blind-Long Term Care	Medically Needy	Blind
24	Blind-Medically Needy	Medically Needy	Blind
27	Blind-Medically Needy-SOC	Medically Needy	Blind
34	TANF-Medically Needy	Medically Needy	Families
37	TANF/Medically Needy-SOC	Medically Needy	Families
39	Initial TMC (6 months)	Medically Needy	Families
3N	1931(b)	Medically Needy	Families
54	Four Month Continuing	Medically Needy	Families
59	Continuing TMC (6 months)	Medically Needy	Families
63	Disabled-Long Term Care	Medically Needy	Disabled
64	Disabled-Medically Needy	Medically Needy	Disabled
67	Disabled-Medically Needy-SOC	Medically Needy	Disabled
6G	250% Working Disabled	Medically Needy	Disabled
6H	250% Working Disabled-Undocs	Medically Needy	Disabled
6J	SB87 Pending Disability Program	Medically Needy	Families
6R	Potential grandfathered SSI disabled children	Medically Needy	Families
6V	Model/DDS Regional Waivers (No SOC)	Medically Needy	Disabled
6W	Model/DDS Regional Waiver SOC	Medically Needy	Disabled
6X	Model Waiver (No SOC)	Medically Needy	Disabled
6Y	Model Waiver SOC	Medically Needy	Disabled
7J	Continuous Eligibility for Children	Medically Needy	Families
8G	SEVERELY IMPAIRED WORKING INDIVIDUAL	Medically Needy	Disabled